

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS): TELEPHONE: ATTORNEY FOR (NAME):	FOR COURT USE ONLY:
Insert name of court, judicial district or branch court, if any, and post office and street address:	
PLAINTIFF:	
DEFENDANT:	
<div style="text-align: center;">ANSWER—Contract</div> <input type="checkbox"/> TO COMPLAINT OF (name): <input type="checkbox"/> TO CROSS-COMPLAINT (name):	CASE NUMBER:

1. This pleading, including attachments and exhibits, consists of the following number of pages: _____
2. DEFENDANT (*name*):
answers the complaint or cross-complaint as follows:
3. Check ONLY ONE of the next two boxes:
 - a. ☐ Defendant generally denies each statement of the complaint or cross-complaint. (*Do not check this box if the verified complaint or cross-complaint demands more than \$1,000.*)
 - b. ☐ Defendant admits that all of the statements of the complaint or cross-complaint are true EXCEPT:
 - (1) Defendant claims the following statements are false (*use paragraph numbers or explain*):

- ☐ Continued on Attachment 3.b.(1).
- (2) Defendant has no information or belief that the following statements are true, so defendant denies them (*use paragraph numbers or explain*):

☐ Continued on Attachment 3.b.(2).

If this form is used to answer a cross-complaint, plaintiff means cross-complainant and defendant means cross-defendant.

SHORT TITLE:	CASE NUMBER:
--------------	--------------

ANSWER—Contract

4. ☐ AFFIRMATIVE DEFENSES Defendant alleges the following additional reasons that plaintiff is not entitled to recover anything:

☐ Continued on Attachment 4.

5. ☐ Other

6. DEFENDANT PRAYS

a. that plaintiff take nothing.

b. ☐ for costs of suit.

c. ☐ other (*specify*):

.....
(Type or print name)

(Signature of party or attorney)